



**DEPARTMENT OF ENVIRONMENTAL PROTECTION
INDIVIDUAL VOLUNTEER APPLICATION**

If you would like to volunteer your services or time with our department, please fill out the information below and send it to the appropriate office or facility.

Name _____ Date _____
(Please Print)

Address/Town/Zip _____

Telephone # (Home) _____ Work _____

If available, Email Address: _____

Place of Employment _____

Should we need to reach you, is it permissible to call you at work? Yes _____ No _____

Emergency Contact _____ Relationship _____

Contact Phone # _____

Have you volunteered at DEP before? _____ Where _____

When _____ Task(s) Performed _____

Please indicate the type of activity in which you are interested (indoor or outdoor, clerical, artistic, research, forestry, environmental health, writing, highway/river cleanup, recycling, interpretive/educational, etc.)

Location(s) preferred _____
(By order of first choice)

Would you be willing to travel to various locations? _____

Valid Driver's License ☐ Yes ☐ No - If yes, License Number _____

If you are younger than 18 years old, enter your age _____

Do you have any affiliation with related groups or organizations? (E.g.: Audubon Society; Garden Clubs, Volunteer Groups, Friends Groups) If yes, please indicate below.

Experience (professional certifications, community service, training or special licenses) that may assist in your volunteer work (if any certificates or other licenses have expiration dates, indicate the dates)

Are you fluent in a language other than English? If yes, which ones: _____

Have you ever been convicted under criminal or military law, forfeited bond or collateral, or are criminal charges currently pending against you? (Exclude minor traffic violations or any offense settled in juvenile court or under a youth offender law.)

☐ Yes ☐ No (If yes, attach a detailed explanation about the nature of conviction, degree of rehabilitation and if applicable, how long it has been since you were released.)

I certify that the information on this application is correct. I authorize the Department of Environmental Protection to call my references to obtain information pertinent to my responsibilities as a volunteer at the DEP. I agree to abide by the policies, directives and laws of the DEP. I understand that the first month is a trial match for both DEP and myself, to see if my experience is a good match with the DEP.

Signature _____ Date _____

The DEP is an affirmative action/equal opportunity employer, providing programs and services in a fair and impartial manner. In conformance with the American with Disabilities Act, DEP makes every effort to provide equally effective services for persons with disabilities.

(Individual Volunteer Application
Revised. -January, 2002)

INDIVIDUAL VOLUNTEER APPLICATION - REQUEST FOR REFERENCES

POTENTIAL VOLUNTEER: _____
Print Name

Please provide the name of three references who know your abilities and interests:

1. Personal Reference

Name:

Phone Number:

Describe how long you have known this person and what type of relationship you have with this person.

1. Employment Reference (if applicable)

Name:

Organization:

Phone Number:

Describe your relationship with this organization, including duties performed and dates of employment.

2. Volunteer Reference (if applicable)

Name:

Organization:

Phone Number:

Describe your volunteer assignments and length of time you served with this organization.